Title 18 (Medicare) Certified?

COUNTRYSIDE HOME
1425 WISCONSIN DRIVE

Number of Beds Set Up and Staffed (12/31/02):

JEFFERSON 53549 Phone: (920) 674-3170 Ownership: County
Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No

Total Licensed Bed Capacity (12/31/02): 205 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/02: 129 Average Daily Census: 154

171

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02) %							
Home Health Care Supp. Home Care-Personal Care	No No			Age Groups 	%		14.7 51.9		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.8	More Than 4 Years	33.3		
Day Services	No	Mental Illness (Org./Psy)	40.3	65 - 74	7.8	I			
Respite Care	No	Mental Illness (Other)	14.0	75 - 84	38.8	1	100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	35.7	* * * * * * * * * * * * * * * * * * *	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over 10.1		Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 H	Residents		
Home Delivered Meals	No	Fractures	1.6		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	20.2	65 & Over	92.2				
Transportation	No	Cerebrovascular	10.9			RNs	7.6		
Referral Service	No	Diabetes	3.1	Sex	%	LPNs	16.0		
Other Services	No	Respiratory	2.3			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	6.2	Male	27.9	Aides, & Orderlies	51.6		
Mentally Ill	No			Female	72.1	1			
Provide Day Programming for			100.0			I			
Developmentally Disabled	No				100.0	I			

Method of Reimbursement

		edicare itle 18			Medicaid (Title 19)		Other		Private Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	 %	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	4	3.4	130	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	3.1
Skilled Care	0	0.0	0	110	94.8	111	0	0.0	0	12	92.3	192	0	0.0	0	0	0.0	0	122	94.6
Intermediate				2	1.7	92	0	0.0	0	1	7.7	162	0	0.0	0	0	0.0	0	3	2.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		116	100.0		0	0.0		13	100.0		0	0.0		0	0.0		129	100.0

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
Deaths During Reporting Period													
					% Needing		Total						
Percent Admissions from:		Activities of	용	As	sistance of	% Totally	Number of						
Private Home/No Home Health	19.7	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents						
Private Home/With Home Health	0.0	Bathing	2.3		66.7	31.0	129						
Other Nursing Homes	0.0	Dressing	10.9		59.7	29.5	129						
Acute Care Hospitals	73.8	Transferring	33.3		42.6	24.0	129						
Psych. HospMR/DD Facilities	3.3	Toilet Use	22.5		46.5	31.0	129						
Rehabilitation Hospitals	0.0				24.0	20.2	129						
Other Locations	3.3	********	*****	*****	*****	*****	*****						
Total Number of Admissions	61	Continence		용	Special Treat	ments	%						
Percent Discharges To:		Indwelling Or Extern	al Catheter	8.5	Receiving R	espiratory Care	9.3						
Private Home/No Home Health	23.2	Occ/Freq. Incontinen	t of Bladder	65.1	Receiving T	racheostomy Care	0.8						
Private Home/With Home Health	3.2	Occ/Freq. Incontinen	t of Bowel	41.9	Receiving S	uctioning	0.8						
Other Nursing Homes	3.2				Receiving O	stomy Care	0.8						
Acute Care Hospitals	9.5	Mobility			Receiving T	ube Feeding	3.1						
Psych. HospMR/DD Facilities	1.1	Physically Restraine	d	3.9	Receiving M	echanically Altered Diet:	34.1						
Rehabilitation Hospitals	0.0												
Other Locations	10.5	Skin Care			Other Residen	t Characteristics							
Deaths	49.5	With Pressure Sores		0.8	Have Advanc	e Directives	71.3						
Total Number of Discharges		With Rashes		10.9	Medications								
(Including Deaths)	95	I			Receiving P	sychoactive Drugs	68.2						

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:		Size:		ensure:		
	This	Government		2	00+	Ski	lled	Al	1
	Facility	Facility Peer		Peer	Group	Peer	Group	Faci	lities
	96	90	Ratio	ଚ	Ratio	90	Ratio	olo	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.9	84.6	0.87	86.5	0.85	86.7	0.85	85.1	0.87
Current Residents from In-County	78.3	55.3	1.42	44.5	1.76	69.3	1.13	76.6	1.02
Admissions from In-County, Still Residing	31.1	26.2	1.19	23.9	1.31	22.5	1.39	20.3	1.53
Admissions/Average Daily Census	39.6	60.4	0.66	40.5	0.98	102.9	0.38	133.4	0.30
Discharges/Average Daily Census	61.7	64.0	0.96	47.8	1.29	105.2	0.59	135.3	0.46
Discharges To Private Residence/Average Daily Censu	s 16.2	19.7	0.82	11.2	1.45	40.9	0.40	56.6	0.29
Residents Receiving Skilled Care	97.7	85.5	1.14	83.7	1.17	91.6	1.07	86.3	1.13
Residents Aged 65 and Older	92.2	88.5	1.04	90.9	1.02	93.6	0.99	87.7	1.05
Title 19 (Medicaid) Funded Residents	89.9	79.1	1.14	80.4	1.12	69.0	1.30	67.5	1.33
Private Pay Funded Residents	10.1	16.2	0.62	16.7	0.60	21.2	0.47	21.0	0.48
Developmentally Disabled Residents	0.0	0.5	0.00	0.3	0.00	0.6	0.00	7.1	0.00
Mentally Ill Residents	54.3	48.2	1.13	42.4	1.28	37.8	1.43	33.3	1.63
General Medical Service Residents	6.2	20.0	0.31	23.4	0.26	22.3	0.28	20.5	0.30
Impaired ADL (Mean)	51.3	44.1	1.16	42.3	1.21	47.5	1.08	49.3	1.04
Psychological Problems	68.2	62.8	1.09	60.8	1.12	56.9	1.20	54.0	1.26
Nursing Care Required (Mean)	7.6	7.5	1.01	7.7	0.98	6.8	1.11	7.2	1.05